

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF NORTH CAROLINA

IN RE:

BOBBY L LAMM
DARLENE HILL LAMM
PO BOX 434
TRINITY, NC 27370CASE NO. 20-10683
JUDGE BENJAMIN A. KAHN

DEBTORS

SSN(1) XXX-XX-5445

SSN(2) XXX-XX-1351

DATE: 07/29/2021

REPORT OF FILED CLAIMS

Pursuant to 11 U.S.C. §704(5), the trustee has examined the proofs of claims filed in this case and objected to the allowance of such claims as appeared to be improper except where no purpose would have been served by such objection. After such examination and objections, if any, the trustee states that claims should be deemed allowed or “not filed” as indicated below.

NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
ASHLEY FUNDING SERVICES LLC % RESURGENT CAPITAL SERVICES P O BOX 10587 GREENVILLE, SC 29603-0587	\$225.00 INT: .00% NAME ID: 43468 CLAIM #: 0010	(X) SPECIAL-UNSECURED ACCT: 9750 COMMENT: LAB CORP,CLASS A,721OR
ASHLEY FUNDING SERVICES LLC % RESURGENT CAPITAL SERVICES P O BOX 10587 GREENVILLE, SC 29603-0587	\$35.00 INT: .00% NAME ID: 43468 CLAIM #: 0026	(X) SPECIAL-UNSECURED ACCT: 2450 COMMENT: CLASS A,721OR
DAVIDSON ANES CONSULTANTS PA P O BOX 63190 CHARLOTTE, NC 28263	\$0.00 INT: .00% NAME ID: 120354 CLAIM #: 0005	(U) UNSECURED NOT FILED ACCT: COMMENT:
DISH NETWORK P O BOX 9033 LITTLETON, CO 80160	\$0.00 INT: .00% NAME ID: 34614 CLAIM #: 0006	(U) UNSECURED NOT FILED ACCT: COMMENT:
EYE CARE CENTER P O BOX 207249 DALLAS, TX 75320	\$0.00 INT: .00% NAME ID: 183061 CLAIM #: 0007	(U) UNSECURED NOT FILED ACCT: COMMENT:
FINANCIAL DATA SYSTEMS P O BOX 688 WRIGHTSVILLE BEACH, NC 28480-0688	\$0.00 INT: .00% NAME ID: 122295 CLAIM #: 0008	(U) UNSECURED NOT FILED ACCT: COMMENT:
H&R ACCOUNTS 5320 22ND AVE MOLINE, IL 61265	\$0.00 INT: .00% NAME ID: 162551 CLAIM #: 0009	(U) UNSECURED NOT FILED ACCT: COMMENT:
INTERNAL REVENUE SERVICE P O BOX 7346 PHILADELPHIA, PA 19101-7346	\$0.00 INT: .00% NAME ID: 123770 CLAIM #: 0001	(P) PRIORITY NOT FILED ACCT: 5445 COMMENT:

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
LVNV FUNDING LLC % RESURGENT CAPITAL SERVICES P O BOX 10587 GREENVILLE, SC 29603-0587	\$787.58 INT: .00% NAME ID: 43307 CLAIM #: 0004	(X) SPECIAL-UNSECURED ACCT: 7612 COMMENT: CITIBANK,CLASS A/B,721OR
MEDICREDIT CORPORATION P O BOX 411187 SAINT LOUIS, MO 63141-3187	\$0.00 INT: .00% NAME ID: 169854 CLAIM #: 0011	(U) UNSECURED NOT FILED ACCT: COMMENT:
MEMBERS CREDIT UNION % KIRSCHBAUM NANNEY KEENAN & GRIFFIN P O BOX 19806 RALEIGH, NC 27619	\$8,130.86 INT: .00% NAME ID: 168450 CLAIM #: 0012	(X) SPECIAL-UNSECURED ACCT: 5141 COMMENT: CLASS A,721OR
MEMBERS CREDIT UNION % KIRSCHBAUM NANNEY KEENAN & GRIFFIN P O BOX 19806 RALEIGH, NC 27619	\$3,048.22 INT: .00% NAME ID: 168450 CLAIM #: 0022	(X) SPECIAL-UNSECURED ACCT: 5142 COMMENT: CLASS A/B,721OR
N C DEPARTMENT OF REVENUE BANKRUPTCY UNIT P O BOX 1168 RALEIGH, NC 27602-1168	\$0.00 INT: .00% NAME ID: 9699 CLAIM #: 0002	(P) PRIORITY NOT FILED ACCT: 5445 COMMENT:
NOVANT HEALTH 2000 FRONTIS PLAZA BLVD WINSTON SALEM, NC 27103	\$0.00 INT: .00% NAME ID: 159620 CLAIM #: 0013	(U) UNSECURED NOT FILED ACCT: COMMENT:
NOVANT HEALTH RCS/WHITEHALL P O BOX 30143 CHARLOTTE, NC 28230-0143	\$2,666.31 INT: .00% NAME ID: 145134 CLAIM #: 0024	(X) SPECIAL-UNSECURED ACCT: COMMENT: CLASS A,721OR
NOVANT HEALTH P O BOX 1123 MINNEAPOLIS, MN 55440-1123	\$5,175.78 INT: .00% NAME ID: 173897 CLAIM #: 0025	(U) UNSECURED ACCT: 1351 COMMENT: CLASS B,721OR
NOVANT HEALTH RCS/WHITEHALL P O BOX 30143 CHARLOTTE, NC 28230-0143	\$1,245.82 INT: .00% NAME ID: 145134 CLAIM #: 0028	(U) UNSECURED ACCT: COMMENT: CLASS B,721OR,
PIEDMONT TRIAD ANESTHESIA PA 145 KIMEL PARK DR STE 100 WINSTON SALEM, NC 27103	\$78.20 INT: .00% NAME ID: 183079 CLAIM #: 0014	(U) UNSECURED ACCT: COMMENT: CLASS B,721OR
RANDOLPH CO REGISTER OF DEEDS P O BOX 4458 ASHEBORO, NC 27204	\$52.00 INT: .00% NAME ID: 1541 CLAIM #: 0027	(Z) SPECIAL COST ITEM ACCT: COMMENT:
RANDOLPH COUNTY TAX 725 MCDOWELL RD ASHEBORO, NC 27205	\$54.79 INT: .00% NAME ID: 9626 CLAIM #: 0003	(P) PRIORITY ACCT: 5445 COMMENT: OC

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
RANDOLPH COUNTY TAX 725 MCDOWELL RD ASHEBORO, NC 27205	\$267.12 INT: 10.30% NAME ID: 9626 CLAIM #: 0020	(S) SECURED ACCT: 5445 COMMENT: OC,TAXES
RANDOLPH COUNTY TAX 725 MCDOWELL RD ASHEBORO, NC 27205	\$79.79 INT: .00% NAME ID: 9626 CLAIM #: 0021	(X) SPECIAL-UNSECURED ACCT: 5445 COMMENT: SPLIT,CLASS A,721OR
RMB OF NORTH CAROLINA INC 409 BEARDEN PARK CIR KNOXVILLE, TN 37919	\$0.00 INT: .00% NAME ID: 183062 CLAIM #: 0015	(U) UNSECURED NOT FILED ACCT: COMMENT:
THOMASVILLE MEDICAL CENTER P O BOX 71049 CHARLOTTE, NC 28272	\$0.00 INT: .00% NAME ID: 69679 CLAIM #: 0016	(U) UNSECURED NOT FILED ACCT: COMMENT:
TRIAD RADIOLOGY ASSOCIATES PLLC P O BOX 63111 CHARLOTTE, NC 28263	\$0.00 INT: .00% NAME ID: 173365 CLAIM #: 0017	(U) UNSECURED NOT FILED ACCT: COMMENT:
WAKE FOREST BAPTIST HEALTH 1 MEDICAL CENTER BLVD WINSTON SALEM, NC 27157	\$190.48 INT: .00% NAME ID: 155374 CLAIM #: 0018	(U) UNSECURED ACCT: 1351 COMMENT: CLASS B,721OR
WAKE FOREST BAPTIST HEALTH 1 MEDICAL CENTER BLVD WINSTON SALEM, NC 27157	\$68.70 INT: .00% NAME ID: 155374 CLAIM #: 0023	(X) SPECIAL-UNSECURED ACCT: 5445 COMMENT: CLASS A,721OR
WAKEFIELD & ASSOCIATES 7005 MIDDLEBROOK PIKE KNOXVILLE, TN 37909	\$0.00 INT: .00% NAME ID: 182009 CLAIM #: 0019	(U) UNSECURED NOT FILED ACCT: COMMENT:
TOTAL:	\$22,105.65	
JOHN T ORCUTT ESQ 6616-203 SIX FORKS ROAD RALEIGH, NC 27615	\$4,000.00	ATTORNEY FEE

ANITA JO KINLAW TROXLER,
TRUSTEE
500 W FRIENDLY AVE STE 200
P O BOX 1720
GREENSBORO, NC 27402-1720

NOTICE OF FILING OF REPORT OF FILED CLAIMS

The foregoing Report of Filed Claims has been filed with the Bankruptcy Court based on an audit of claims filed in the Trustee's office. The claims are allowed unless objection is made by the Debtors or other party in interest.

Any objection to a claim should be filed in writing with the Bankruptcy Court at the address below and a copy must be served on the Trustee:

Clerk, U.S. Bankruptcy Court
101 S. Edgeworth Street
P.O. Box 26100
Greensboro, NC 27420-6100

If an objection is filed, a hearing will be scheduled before the Court. The Trustee will continue making disbursements on the claims unless an objection is filed.

Date: 07/29/2021

OFFICE OF THE CHAPTER 13 TRUSTEE

By: /s/ Gayle McFarland
Clerk
Chapter 13 Office
500 W FRIENDLY AVE STE 200
P O BOX 1720
GREENSBORO, NC 27402-1720

cc: Debtors
Attorney for Debtors - Electronic Notice